POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	7		
O.I.P.E. CLASSIFIER			9-2-0
FORMALITY REVIEW	TH	953	06-09-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim — Final / Original — Date (columns 1–50)

Claim — Final / Original — Date (columns 51–100)

Claim — Final / Original — Date (columns 101–150)

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)